

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LET AMERICA WORK

ADDRESS (number and street)

PO BOX 9891

Check if different
than previously
reported. (ACC)

ARLINGTON

VA

22219

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00582700

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

MITCHELL, GEORGE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MITCHELL, GEORGE, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LET AMERICA WORK

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		184760.05
(b) Cash on Hand at Beginning of Reporting Period.....	580973.03	
(c) Total Receipts (from Line 19)	217200.00	1324801.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	798173.03	1509561.05
7. Total Disbursements (from Line 31).....	673164.44	1384552.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	125008.59	125008.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LET AMERICA WORK

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

217000.00

1324200.00

(ii) Unitemized

200.00

601.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

217200.00

1324801.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

217200.00

1324801.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

217200.00

1324801.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

217200.00

1324801.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	217044.94	520301.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	217044.94	520301.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	456119.50	864250.65
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	673164.44	1384552.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	673164.44	1384552.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	217200.00	1324801.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	217200.00	1324801.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	217044.94	520301.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	217044.94	520301.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICHOLS, THOMAS, J., ,

Mailing Address 14555 JUNEAU BLVD

City
ELM GROVEState
WIZip Code
53122-1667FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEISSNER TIERNEY FISHER & NICHOLSOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11A.73

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SLOCUM, WENDY, , ,

Mailing Address 2429 E WYOMING PL

City
MILWAUKEEState
WIZip Code
53202-1219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BURKE PROPERTIESOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11A.74

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AHERN, TRIPP, , ,

Mailing Address N5207 OAK HILL RD.

City
FOND DU LACState
WIZip Code
54937-9690FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
J.F. AHERN CO.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 13 / 2016

Transaction ID : SA11A.76

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

11000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AHERN, ANTHONY, , ,

Mailing Address 855 MORRIS STREET

City
FOND DU LAC

State
WI

Zip Code
54935-5611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JF AHERN

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 14 / 2016

Transaction ID : SA11A.77

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUPY, MICHAEL, , ,

Mailing Address 3340 N WINDERMERE CT

City
MILWAUKEE

State
WI

Zip Code
53211-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUPY & ABRAHAM SC

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 14 / 2016

Transaction ID : SA11A.75

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GENTINE, LOUIS, P., ,

Mailing Address PO BOX 747

City
ELKHART LAKE

State
WI

Zip Code
53020-0747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11A.79

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 27
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PLATT, ROBERT, J., ,

Mailing Address 226 KENMORE ST

City
 ELMHURST

State
 IL

Zip Code
 60126-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 MOSTARDI PLATT

Occupation (for Individual)
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / **19** / **2016**

Transaction ID : SA11A.80

Amount of Each Receipt this Period

2500.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WHITE, MICHAEL, H., ,

Mailing Address 1150 BRADLEY RD

City
 MILWAUKEE

State
 WI

Zip Code
 53217-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 RITE-HITE HOLDING CORP

Occupation (for Individual)
 CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

08 / **19** / **2016**

Transaction ID : SA11A.78

Amount of Each Receipt this Period

25000.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DUCHOSSOIS, CRAIG, , ,

Mailing Address 845 N LARCH AVE

City
 ELMHURST

State
 IL

Zip Code
 60126-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 THE DUCHOSSOIS GROUP

Occupation (for Individual)
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

08 / **22** / **2016**

Transaction ID : SA11A.81

Amount of Each Receipt this Period

10000.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOHLER, MARY, S., ,

Mailing Address PO BOX 897

City
SHEBOYGAN

State
WI

Zip Code
53082-0897

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINDWAY CAPITAL CORP

Occupation (for Individual)
PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11A.82

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BELL, BRUCE, , ,

Mailing Address 958 HICKORY AVE

City
DE PERE

State
WI

Zip Code
54115-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BELMARK, INC

Occupation (for Individual)
CHAIRMAN / FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11A.83

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EINHORN, NANCY, , ,

Mailing Address 8205 N. RIVER ROAD

City
MILWAUKEE

State
WI

Zip Code
53217-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11A.85

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

20000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 27
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EINHORN, STEVE, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>08 / 30 / 2016</div> </div>	
Mailing Address 8205 N RIVER RD			Transaction ID : SA11A.84	
City MILWAUKEE	State WI	Zip Code 53217-2546	Amount of Each Receipt this Period <div> <div>5000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) CAPITAL MIDWEST FUND		Occupation (for Individual) VENTURE CAPITAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>15000.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHERCHIAN, ARA, A., ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>09 / 01 / 2016</div> </div>	
Mailing Address 3100 NAGAWICKA RD			Transaction ID : SA11A.86	
City HARTLAND	State WI	Zip Code 53029-9355	Amount of Each Receipt this Period <div> <div>2000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>3000.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HERRO, DAVID, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>09 / 02 / 2016</div> </div>	
Mailing Address 65 E. GOETHE, #3W			Transaction ID : SA11A.87	
City CHICAGO	State IL	Zip Code 60610-7260	Amount of Each Receipt this Period <div> <div>50000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) HARRIS ASSOCIATES, LP		Occupation (for Individual) INVESTMENT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>50000.00</div> </div>		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOHLER, TERRY, , ,

Mailing Address P.O. BOX 897

City
SHEBOYGAN

State
WI

Zip Code
53082-0897

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINDWAY CAPITAL CORP

Occupation (for Individual)
PRES/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11A.88

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABRAHAM, WILLIAM, J, , JR

Mailing Address 11698 N CANTERBURY LN, 41W

City
MEQUON

State
WI

Zip Code
53092-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FOLEY & LARDNER

Occupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.93

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONARD, EDWARD, W, ,

Mailing Address 77 WATER ST, FL 9

City
NEW YORK

State
NY

Zip Code
10005-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.94

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

37500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 27
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HANSEN, MICHAEL, , ,

Mailing Address **7648 SOUTH PINE AVENUE**

City
OAK CREEK

State
WI

Zip Code
53154-2343

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JACSTEN

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

09 / 30 / 2016

Transaction ID : **SA11A.91**

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HARTUNG, DANIEL, J., ,

Mailing Address **56 ARBOREDGE WAY**

City
FITCHBURG

State
WI

Zip Code
53711-7213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARTUNG BROTHERS INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

09 / 30 / 2016

Transaction ID : **SA11A.89**

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

217000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2016

FEC Identification Number

C**Transaction ID : 223**

Amount of Each Disbursement this Period

195.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GITCHO, GAIL, , ,

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

FEC Identification Number

C**Transaction ID : 208**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BMO CONSULTING

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

FEC Identification Number

C**Transaction ID : 232**

Amount of Each Disbursement this Period

975.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6170.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C**Transaction ID : 235**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C**Transaction ID : 236**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MADISON MANAGEMENT GROUP

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C**Transaction ID : 211**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14040.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 215

Amount of Each Disbursement this Period

12474.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STICK & RUDDER STRATEGIES, INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address 705 MELVIN AVE # 105

City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 220

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		13		2016

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 216

Amount of Each Disbursement this Period

22500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

39974.58

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD, STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	2		2	0	1	6		

FEC Identification Number

C**Transaction ID : 205**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PREMIERE GLOBAL SERVICES

Mailing Address PO BOX 404351

City
ATLANTAState
GAZip Code
30384Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5		2	0	1	6		

FEC Identification Number

C**Transaction ID : 214**

Amount of Each Disbursement this Period

1516.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STEPHENS, CINDY, , ,

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				0	5		2	0	1	6		

FEC Identification Number

C**Transaction ID : 203**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16016.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : 237**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCLAUGHLIN & ASSOCIATES, INC.

Mailing Address 566 SOUTH ROUTE 303

City
BLAUVELTState
NYZip Code
10913Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : 212**

Amount of Each Disbursement this Period

35250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SENTINEL STRATEGIC ADVISORS, LLCMailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : 217**

Amount of Each Disbursement this Period

11901.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

47171.13

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. STICK & RUDDER STRATEGIES, INC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	6		

Mailing Address 705 MELVIN AVE # 105

City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 221**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GITCHO, GAIL, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	6		

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 209**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BMO CONSULTING

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	6		

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 233**

Amount of Each Disbursement this Period

787.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10787.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

FEC Identification Number

C**Transaction ID : 224**

Amount of Each Disbursement this Period

39.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

FEC Identification Number

C**Transaction ID : 225**

Amount of Each Disbursement this Period

39.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

FEC Identification Number

C**Transaction ID : 226**

Amount of Each Disbursement this Period

390.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

468.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD, STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

FEC Identification Number

C**Transaction ID : 206**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : 227**

Amount of Each Disbursement this Period

195.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	1	6		

FEC Identification Number

C**Transaction ID : 228**

Amount of Each Disbursement this Period

390.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1085.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

FEC Identification Number

C**Transaction ID : 200**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STEPHENS, CINDY, , ,

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

FEC Identification Number

C**Transaction ID : 204**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BMO CONSULTING

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

FEC Identification Number

C**Transaction ID : 234**

Amount of Each Disbursement this Period

1125.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15145.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

FEC Identification Number

C**Transaction ID : 201**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCLAUGHLIN & ASSOCIATES, INC.

Mailing Address 566 SOUTH ROUTE 303

City
BLAUVELTState
NYZip Code
10913Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

FEC Identification Number

C**Transaction ID : 213**

Amount of Each Disbursement this Period

27500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

FEC Identification Number

C**Transaction ID : 229**

Amount of Each Disbursement this Period

8.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27528.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. GITCHO, GAIL, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : 210

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : 218

Amount of Each Disbursement this Period

17250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : 219

Amount of Each Disbursement this Period

10808.41

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

33058.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. STICK & RUDDER STRATEGIES, INC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

Mailing Address 705 MELVIN AVE # 105

FEC Identification Number

C**Transaction ID : 222**

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemCity
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	6		

Mailing Address 1445-A LAUGHLIN AVE

FEC Identification Number

C**Transaction ID : 202**

Amount of Each Disbursement this Period

20.00

☐ Memo ItemCity
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

Mailing Address 1593 SPRING HILL RD, STE 400

FEC Identification Number

C**Transaction ID : 207**

Amount of Each Disbursement this Period

500.00

☐ Memo ItemCity
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

5520.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

FEC Identification Number

C**Transaction ID : 230**

Amount of Each Disbursement this Period

19.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

FEC Identification Number

C**Transaction ID : 231**

Amount of Each Disbursement this Period

58.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

78.60

217044.94

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 27
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LET AMERICA WORK				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00582700 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Full Name of Payee <input type="checkbox"/> Memo Item STICK & RUDDER STRATEGIES INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 01 / 2016 </div>		
Mailing Address 705 MELVIN AVE #105			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 391887.00 </div>		
City ANNAPOLIS		State MD	Zip Code 21401		Transaction ID : 1000
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 30 / 2016 </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 30 / 2016 </div>	
Name of Federal Candidate: FEINGOLD, RUSSELL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: WI <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 854038.65 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item STICK & RUDDER STRATEGIES INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 01 / 2016 </div>		
Mailing Address 705 MELVIN AVE #105			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 13921.50 </div>		
City ANNAPOLIS		State MD	Zip Code 21401		Transaction ID : 1001
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 02 / 2016 </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 02 / 2016 </div>	
Name of Federal Candidate: FEINGOLD, RUSSELL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: WI <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 854038.65 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 405808.50 </div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 405808.50 </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>MITCHELL, GEORGE, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 15 / 2016 </div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 27
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LET AMERICA WORK				FEC IDENTIFICATION NUMBER ▼ C C00582700	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee STICK & RUDDER STRATEGIES INC <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 17 / 2016	
Mailing Address 705 MELVIN AVE #105				Amount 50311.00	
City ANNAPOLIS		State MD	Zip Code 20401	Transaction ID : 1002	
Purpose of Expenditure MEDIA			Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2016	
Name of Federal Candidate: FEINGOLD, RUSSELL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: WI	
Calendar Year-To-Date Per Election for Office Sought 854038.65				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address				Amount	
City		State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure			Category/ Type		
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: State:	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				50311.00	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures				456119.50	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature MITCHELL, GEORGE, , ,				Date MM / DD / YYYY 10 / 15 / 2016	

[Electronically Filed]